

ARIZONA STATE DEPARTMENT OF HEALTH
DIVISION OF VITAL STATISTICS
CERTIFICATE OF AUTOPSY OR INQUEST
(TO SUPPLEMENT DEATH CERTIFICATE)

STATE FILE NO. 3806

REGISTRAR'S NO.

IDENTIFYING FORMATION	1. NAME OF DECEASED Unidentified Female (later identified as PEGGY BAULTZER)		2. DATE OF DEATH Found May 4, 1959		
	3. PLACE OF DEATH 3109 East Van Buren (Rear), Phoenix, Arizona				
AUTOPSY OR INQUEST	4. An investigation <small>(AUTOPSY/INQUEST)</small> having been completed after the filing of the death certificate of the above-named, I hereby supplement or amend the information appearing on the original death certificate.				
CAUSE OF DEATH	5. CAUSE OF DEATH <small>ENTER ONLY ONE CAUSE PER LINE FOR (A), (B), (C).</small> <small>*THIS DOES NOT MEAN THE MODE OF DYING, SUCH AS HEART FAILURE, ASTHMA, ETC. IT MEANS THE DISEASE INJURY, OR COMPLICATION WHICH CAUSED DEATH.</small> <small>PLACE DISEASE CONTRAICTED.</small>		MEDICAL CERTIFICATION		INTERVAL BETWEEN ONSET AND DEATH
			1. DISEASE OR CONDITIONS DIRECTLY LEADING TO DEATH* (A) _____		
			ANTECEDENT CAUSES MORBID CONDITIONS, IF ANY, GIVING RISE TO THE ABOVE CAUSE (A) STATING THE UNDERLYING CAUSE LAST. DUE TO (B) _____ DUE TO (C) _____		
			11. OTHER SIGNIFICANT CONDITIONS CONDITIONS CONTRIBUTING TO THE DEATH BUT NOT RELATING TO THE DISEASE OR CONDITION CAUSING DEATH.		
DEATH DUE TO EXTERNAL VIOLENCE	5A. ACCIDENT SUICIDE HOMICIDE ✓ Homicide <small>(SPECIFY)</small> 5D. TIME (MONTH) (DAY) (YEAR) (HOUR) OF INJURY ? M		5B. PLACE OF INJURY (E. G., IN OR ABOUT HOME, FARM, FACTORY, STREET, OFFICE BLDG., ETC.) body found 3109 E. Van Buren 5E. INJURY OCCURRED WHILE AT WORK <input type="checkbox"/> NOT WHILE AT WORK <input checked="" type="checkbox"/>		5C. (CITY OR TOWN) (COUNTY) (STATE) Phoenix - Maricopa - Ariz. 5F. HOW DID INJURY OCCUR? found stab wounds
COMMENTS					
ATIFICATION	7A. SIGNATURE <i>Adalberto W. [unclear]</i> <small>(DEGREE OR TITLE)</small>		7B. ADDRESS 15110 2nd Ave.,		7C. DATE SIGNED 9-18-1959

over